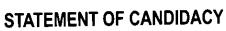
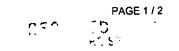
इस रेन्स स्वत्ति हैं स्वत्ति हैं स्वत्ति हैं

FEC FORM 2





17 SEP 18 PH 3: 19

. (a) Name of Candidate (in full)								
Duckworth, L. Tammy, , ,	TI Charles	address changes		2. Candidate's	FEC Identifi	cation N	umber	
(b) Address (number and street) PO Box 10793	treet)		" 	Candidate's FEC Identification Number S6IL00292				
(c) City, State, and ZIP Code				3. Is This	New	OR	×	Amended (A)
Chicago		IL 606		Statement	(N)		اليا	<u> </u>
. Party Affiliation	5. Office Sought			trict of Candidate				
DEMOCRATIC PARTY	Senate		IL					
DF	SIGNATION OF	F PRINCIPAL	L CAMPAIG	N COMMITT	EE			
7. I hereby designate the following na	med political committe	ee as my Principal	I Campaign Com		2022 ar of electio	_ election)	on(s).	
NOTE: This designation should be	filed with the appropria	ate office listed in	the instructions.					
(a) Name of Committee (in full)								
Tammy for Illinois								
(b) Address (number and street) PO Box 10793								
(c) City, State, and ZIP Code				<u> </u>				
			IL	60610				
8. I hereby authorize the following na	· ·	ling Joint Fundrais	sing Representat	tives)		nd fund	s on be	half of my
	(includ)	ling Joint Fundrais	sing Representat	tives)		nd fund	s on be	half of my
I hereby authorize the following national candidacy. NOTE: This designation should be	(includ)	ling Joint Fundrais	sing Representat	tives)		end funds	s on be	half of my
I hereby authorize the following national candidacy.	(Includ) Imed committee, which I filed with the principa	ling Joint Fundrais	sing Representat	tives)		nd funds	s on be	half of my
8. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street)	(Includ) Imed committee, which I filed with the principa	ling Joint Fundrais	sing Representat	tives)		end funds	s on be	half of my
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street	(Includ) Imed committee, which I filed with the principa	ling Joint Fundrais	sing Representat	tives)		and funds	s on be	half of my
8. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101	(Includ) Imed committee, which I filed with the principa	ling Joint Fundrais	sing Representat	tives)		and funds	s on be	half of my
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code	(Includ) Imed committee, which I filed with the principa	ling Joint Fundrais	sing Representat	tives)		and funds	s on be	half of my
8. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101	(Includ) Imed committee, which I filed with the principa	ling Joint Fundrais	sing Represental	ives) ommittee, to recei		and funds	s on be	half of my
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code Foxboro	(Includ) Imed committee, which I filed with the principa	ling Joint Fundrais h is NOT my princ	sing Represental	ommittee, to recei	ve and expe			half of my
8. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code Foxboro	(Includ) Imed committee, which I filed with the principa Fund	ling Joint Fundrais h is NOT my princ	sing Represental	ommittee, to recei	ve and expe			half of my
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code Foxboro I certify that I have ee	(Includ) Imed committee, which I filed with the principa Fund	ling Joint Fundrais h is NOT my princ	sing Represental	ommittee, to recei	ve and expe			half of my
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code Foxboro I certify that I have estimated the control of the control o	(Includ) Imed committee, which I filed with the principa Fund	ling Joint Fundrais h is NOT my princ	sing Represental	ommittee, to recei	ve and expe			half of my
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code Foxboro I certify that I have ee Signature of Candidate Duckworth, L. Thimi.	(Including the committee), which is filed with the principal Fund	ing Joint Fundrais h is NOT my prince al campaign comm	sing Represental cipal campaign con nittee. MA	02035 e and belief it is to Date 08/14/2017	ve and expe	ind comp	plete.	
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code Foxboro I certify that I have estimated the control of the control o	(Including the committee), which is filed with the principal Fund	ing Joint Fundrais h is NOT my prince al campaign comm	sing Represental cipal campaign con nittee. MA	02035 e and belief it is to Date 08/14/2017	ve and expe	ind comp	plete.	
8. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Duckworth Victory (b) Address (number and street) 124 Washington Street Suite 101 (c) City, State, and ZIP Code Foxboro I certify that I have ee Signature of Candidate Duckworth, L. Thimp.	(Including the committee), which is filed with the principal Fund	ing Joint Fundrais h is NOT my prince al campaign comm	sing Represental cipal campaign con nittee. MA	02035 e and belief it is to Date 08/14/2017	ve and expe	ind comp	plete.	

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	2	of	2	
raye		v		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	Illinois Victory 2016	Illinois Victory 2016						
	(b) Address (number and street) 120 Maryland Ave NE							
	(c) City, State, and ZIP Code							
	Washington	DC	20002					
8.	 I hereby authorize the following named committee, which is NOT my pr candidacy. NOTE: This designation should be filed with the principal candidacy. 			behalf of my				
	(a) Name of Committee (in full)	(a) Name of Committee (in full)						
	Illinois Coordinated Victory Fund 2016							
	(b) Address (number and street) PO Box 10933	<u> </u>						
	(c) City, State, and ZIP Code							
	Chicago	IL	60610					
8.	B. I hereby authorize the following named committee, which is NOT my proceedings of the committee (in full) Ourbin Duckworth Victory Fund			behalf of my				
	(b) Address (number and street) 101 W. Grand Ave							
	Ste 200							
	(c) City, State, and ZIP Code							
	Chicago	IL 	60654					
8.	I hereby authorize the following named committee, which is NOT my procandidacy. NOTE: This designation should be filed with the principal can be committed (in full)			n behalf of my				
	,,		•					
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							

OF THE RETURN ADDRESS, FULU AT DUTTED LINE

Foxborough, MA 02035

124 Wa Verdoli



9214 7969 0094 0979 PP00 B987 445P

09/11/2017 USPOSTAGE \$007.50º NEOPOST

ZIP 02035 041M11283428



First Class Mail

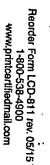
Screened by CASI
Senate Post Office

SEP 1 8 2017

Office of Public Records PO Box 77578 Washington, DC 20013-7578











HART SENATE OFFICE BUILDING SUITE 232

United States Senate

OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116 . PHONE(202) 224-0322

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED
USPS FIRST CLASS MAIL
USPS REGISTERED/CERTIFIED Postmark
USPS PRIORITY MAIL
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL
USPS EXPRESS MAILPostmark
OVERNIGHT DELIVERY SERVICE:
SHIPPING DATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS
UPS
DHL
AIRBORNE EXPRESS
RECEIVED FROM FEDERAL ELECTION COMMISSION Date of Receipt
POSTMARK ILLEGIBLE NO POSTMARK
FAX
Date of Receipt
OTHER Date of Receipt or Postmark
Date of Receipt or Postmark PREPARER DATE PREPARED DATE PREPARED



SEN PATCH



SEN PATCH